

# Incident/Investigation Report

Agency: Gilbert Police Department

Case Number: 13-000000479

## Incident Information

Date/Time Reported 01/09/2013 23:34	Date/Time Occurred 01/09/2013 23:34	Date/Time Found 01/09/2013 23:34	Officer (2849) ROBINSON, CHRISTOPHER
Incident Location E Elliot Rd / N Gilbert Rd, Gilbert, AZ 85234			Supervising Officer (438) LAHTI, JIM
Incident Case Status CLEARED		Status Date 01/10/2013 00:11:29	Incident Case Disposition CLEARED BY ARREST
		Disposition Date 01/10/2013 00:11:29	
MO Factors NONE APPLICABLE()			Body Worn Camera Used NO

## Charges

1	Charge Type State	Description DUI-IMPAIRED TO SLIGHTEST DEGREE			Statute 28-1381A1	UCR 90D	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com
	Alcohol, Drugs or Computers Used <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computers		Location Type STREET/SIDEWALK	Premises Entered	Forced Entry <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Weapons 1. 2. 3.	
	Entry	Exit	Criminal Activity				
	Bias Motivation		Bias Target	Bias Circumstances		Hate Group	
2	Charge Type State	Description DUI-BAC OF .08 OR MORE			Statute 28-1381A2	UCR 90D	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com
	Alcohol, Drugs or Computers Used <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computers		Location Type STREET/SIDEWALK	Premises Entered	Forced Entry <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Weapons 1. 2. 3.	
	Entry	Exit	Criminal Activity				
	Bias Motivation		Bias Target	Bias Circumstances		Hate Group	
3	Charge Type State	Description DRIVING WHEN LICENSE SUSPENDED/REVOKED			Statute 28-3473A	UCR 999	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com
	Alcohol, Drugs or Computers Used <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computers		Location Type STREET/SIDEWALK	Premises Entered	Forced Entry <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Weapons 1. 2. 3.	
	Entry	Exit	Criminal Activity				
	Bias Motivation		Bias Target	Bias Circumstances		Hate Group	

GILBERT POLICE RECORDS  
To: Nick Martin - MuckRock News  
Date: 08/23/2019  
Employee: RCH 5989

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## Victims

Seq. # <b>1</b>	Type SOCIETY STATE OF	Injuries None	Residency Status				Ethnicity			
Business Name STATE OF ARIZONA - 2013							SSN			
AKA		Race	Sex	DOB	Age 00	Height	Weight	Hair	Eyes	
Address					Secondary Phone		Primary Phone			
Employer Name/Address /							Business Phone			
Scars, Marks, Tattoos or other distinguishing features										
Victim of Crimes 1,2,3										

## Offenders

Seq. # <b>1</b>	Type INDIVIDUAL	Injuries None	Residency Status Resident				Ethnicity Non-Hispanic			
Name(Last, First, M) GRISHAM, STEPHANIE ANN							SSN			
AKA		Race W	Sex F	DOB [REDACTED]	Age 36	Height 5'04"	Weight 110 lbs	Hair BLN	Eyes BLU	
Address [REDACTED]					Secondary Phone		Primary Phone			
Employer Name/Address /							Business Phone			
Scars, Marks, Tattoos or other distinguishing features										
Physical Characteristics										

Suspect Details

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## Other Persons Involved

Name Code Involved, Other	Seq. # <b>1</b>	Injuries None	Residency Status Non-Resident	Ethnicity Non-Hispanic				
Name (Last, First, M) ZARZYNSKI, JOSEPH WILDER				SSN [REDACTED]				
AKA	Race W	Sex M	DOB [REDACTED]	Age 25	Height [REDACTED]	Weight [REDACTED]	Hair [REDACTED]	Eyes [REDACTED]
Address [REDACTED]				Secondary Phone		Primary Phone		
Employer Name/Address /						Business Phone		
Scars, Marks, Tattoos or other distinguishing features								

## Property

Prop. ID 346057	Description BLOOD KIT GRISHOM 0001 HRS	Serial Number	Make/Model	
Owner GRISHAM, STEPHANIE ANN		License / State	Color	
Status EVIDENCE IMPOUNDED	Status Officer (2849) ROBINSON, CHRISTOPHER	Quantity 1.00	Units of Measure	Value \$116.00
Gun Type	Caliber	Finish	Grip	Gun Stock
Condition	Gun Test <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Test Type	Sight Test <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Sight Type
Property Notes				

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Case Number: 13-000000479

### Vehicles

Seq. # <b>1</b>	Year 2004	Color BLACK	Style STATION	Make MITSUBISHI	Model ENDEAVOR
VIN [REDACTED]	License Plate Type	License / State AFR8064 / AZ	License Year 2013	Owner GRISHAM, STEPHANIE ANN	
Related To GRISHAM, STEPHANIE ANN ( DRIVER )	Status	Status Date	Value		
Vehicle Notes					

### Assisting Officers

(3668) DYAS, ADAM D

# Incident/Investigation Report

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Case Number: 13-000000479

## Notes/Narratives

### NARRATIVE

#### SYNOPSIS:

On 01/09/2013, at 2334 hours, I stopped Stephanie Grisham at Gilbert and Elliot, in Gilbert, for speeding. She showed signs and symptoms of alcohol impairment and was arrested for DUI. Her license was also suspended. I cited her into Gilbert Municipal Court and released her.

#### NARRATIVE:

On 01/09/2013, at 2334 hours, I was conducting traffic enforcement at Gilbert and Hearne (southeast corner), using my Lidar (serial #PL20594). I observed a black Mitsubishi SUV north of my location traveling south on Gilbert in the number one lane. I visually estimated the vehicle's speed to be approximately 38 mph in the 25-mph-zone. After the vehicle passed me, I activated my Lidar unit and targeted the vehicle at 35 mph, 259 feet south of my location. At this time, there were no other vehicles in that section of roadway. I conducted a traffic stop just south of Gilbert and Elliot and contacted the driver, identified via an Arizona driver's license as Stephanie Grisham. Stephanie advised she and her passenger, Joseph Zarzynski, were coming from a movie at Arizona Mills Mall. Her eyes were bloodshot and watery and I detected the odor of intoxicating beverage coming from the vehicle interior.

Stephanie denied consuming any alcohol. Joseph advised he had been drinking alcohol before they went to the movie. An MVD records search revealed Stephanie's Arizona driver's license was suspended for failure to appear on a traffic citation in Mesa City Court on 08/21/2012. She denied knowledge of the citation or the suspension, adding she was on tour with the Romney campaign from late June through August 2012. However, she still resides at the address listed on her license. I asked Stephanie to exit her vehicle and spoke to her on the sidewalk. I then detected the odor of intoxicating beverage coming directly from her breath. I informed her of such and she again denied consuming any alcohol, exclaiming that I could not smell alcohol on her breath. She then blew directly in my face and I detected the odor of intoxicating beverage to be even stronger (along with the odor of the gum in her mouth).

I conducted HGN, observing six clues of nystagmus. During HGN, Stephanie had a front-to-back sway of two to three inches. She advised her legs hurt from exercising earlier in the day. I therefore did not conduct further FSTs. She reported taking a [REDACTED] one and a half hours earlier and a [REDACTED] the previous night. A PBT showed a BAC of 0.099. I showed the device to Stephanie and she again denied consuming any alcohol. At 2345 hours, I arrested Stephanie for DUI and driving with a suspended license. I handcuffed her and placed her in the rear of my vehicle. I next contacted Joseph, who was still seated in the vehicle. He had bloodshot/watery eyes, droopy eyelids and the odor of intoxicating beverage from his breath. He took possession of Stephanie's purse, at her request, and was released at the scene. He walked to the Gilbert Police Dept lobby and awaited Stephanie's release.

At 2351 hours, I read Stephanie her Miranda warnings and she responded, "Yes," when asked if she understood her rights. At 2352 hours, I also read her Admin Per Se and she responded, "Yep," when asked to submit to the specified test. Ace Towing impounded the vehicle for 30 days, per ARS 28-3511 requirements. A copy of the tow sheet is attached. I transported Stephanie to the Gilbert Police Dept for processing. At 0001 hours, I drew two vials of blood from her right antecubital fossa to be sent to the Mesa Lab for analysis. I packaged, labeled and sealed the blood kit. It remained in my possession until I impounded it immediately following Stephanie's release.

## Incident/Investigation Report

Agency: Gilbert Police Department

Case Number: 13-000000479

### Notes/Narratives

I conducted the standard DUI interview, the details of which are contained on page two of the attachments. Stephanie maintained she did not consume any alcohol since the previous day at 0100 hours. She also reported having fasted all day for a series of tests at her local exercise gym. I cited her into Gilbert Municipal Court and released her in the lobby with the following property:

- Driver`s license
- I-Phone
- Vehicle insurance
- Keys
- Citation/tow sheet

#### CONCLUSION:

On 01/09/2013, at 2345 hours, I arrested Stephanie Grisham following a traffic stop at Gilbert and Elliot, in Gilbert, for speeding. She showed signs and symptoms of alcohol impairment and her Arizona driver`s license was suspended. The following charges are being forwarded to the Gilbert Prosecutor`s Office:

- 1)ARS 28-1381.A1 - DUI/Impaired to the Slightest Degree
- 2)ARS 28-1381.A2 - DUI/BAC 0.08 or Greater
- 3)ARS 28-3473A - Driving with a Suspended License

This case is cleared with one adult arrest

Per Gilbert Police Dept policy, I am requesting restitution in the amount of \$116.00 for the blood kit and lab fees.

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CONTINUATION

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## Incident/Investigation Report

Agency: Gilbert Police Department

Case Number: 13-000000479

### Supplement Information

Date/Time Reported	Supplement Type	Supplement Officer
01/14/2013 11:10:46	FOLLOW UP	(3604) HUDSON, KHALEEYAH Y
Contact Name		Supervising Officer
		(3523) FISHER, DANNY W JR
Incident Case Status	Status Date	Incident Case Disposition
		Disposition Date
MO Factors (Incident Report Only)		Body Worn Camera Used NO

### Supplement Notes

On 01-14-2013, at 1113 hours, I administered a 3511 early release hearing reference this case. Stephanie Ann Grisham, the owner of the vehicle that was towed, presented a valid Arizona Drivers License, valid registration for the vehicle, valid insurance for the vehicle, and presented proof of ownership for the vehicle via the title. Stephanie's license is no longer suspended. I released the vehicle as per ARS 28-3511. I collected the \$100.00 hearing fee and the release paperwork is attached to this supplement.

## Incident/Investigation Report

Agency: Gilbert Police Department

Case Number: 13-000000479

### Supplement Information

Date/Time Reported	Supplement Type	Supplement Officer
02/19/2013 13:18:42	ADDITIONAL INFORMATION ADDED	(2529) NORMAN, DARLENE
Contact Name		Supervising Officer
		(606) RANGEL, PETE
Incident Case Status	Status Date	Incident Case Disposition
		Disposition Date
MO Factors (Incident Report Only)		Body Worn Camera Used NO

### Supplement Notes

The Mesa Police Department forensic laboratory completed the forensic examination to determine the alcohol concentration on a subject by the name of STEPHANIE ANN GRISHAM.

The BAC was determined to be: 0.105%

A copy of the forensic examination report is attached to the report.



## Incident/Investigation Report

Agency: Gilbert Police Department

Case Number: 13-000000479

### Supplement Information

Date/Time Reported 02/20/2013 23:44:17	Supplement Type FOLLOW UP	Supplement Officer (2849) ROBINSON, CHRISTOPHER
Contact Name		Supervising Officer (606) RANGEL, PETE
Incident Case Status	Status Date	Incident Case Disposition Disposition Date
MO Factors (Incident Report Only)		Body Worn Camera Used NO

### Supplement Notes

On 02/20/13, Stephanie Grisham`s Admin Per Se Affidavit was mailed to the MVD to be served after the results of the forensics report from the Mesa Forensic Laboratory revealed a BAC of 0.105%.

A copy of Admin Per Se has been attached to this report.

## ARREST REPORT

WARNING: This report is intended only for the use of the individual or agency to which it is provided, and may contain information that is confidential and/or exempt from disclosure under applicable law. Any unauthorized copying or dissemination of this report is prohibited.

R84 Completed

☐ Yes  
☒ No

IDENTIFICATION	1 ORI #	2 AGENCY NAME		3a ARREST #		3b CASE #		4 SFX																															
	AZ0071100		Gilbert Police Department		130000274		13-000000479																																
	5 LAST, FIRST, MIDDLE NAME					6 ALIAS AKA																																	
	Grisham, Stephanie Ann																																						
	7 SEX	8 RACE	9 HGT.	10 WGT.	11 EYE	12 HAIR	13 SKIN	14	15																														
	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> W	5'04	103-0	BLU	BLN	LGT	<input type="checkbox"/> SCARS	<input type="checkbox"/> MARKS																														
	<input type="checkbox"/> F	<input type="checkbox"/> B						<input type="checkbox"/> TATTOOS	<input type="checkbox"/> AMPUTATIONS																														
	16 PLACE OF BIRTH (CITY, COUNTY, STATE)					17 DATE OF BIRTH		18 AGE																															
								36																															
	20 SID #	21 PCN #					22 DL #		23 ST																														
9701030437																																							
24 FBI #						25 Name ID #:		270067																															
26 <input checked="" type="checkbox"/> RESIDENT	27 HOME ADDRESS (STREET, CITY, STATE, ZIP)					28 RESIDENCE PHONE		29 OCCUPATION (BE SPECIFIC)																															
<input type="checkbox"/> NON-RESIDENT																																							
30 EMPLOYER (NAME OF COMPANY/SCHOOL)					31 BUSINESS ADDRESS (STREET, CITY, STATE, ZIP)					32 BUSINESS PHONE																													
ARREST	33 LOCATION OF ARREST (STREET, CITY, STATE, ZIP)					34 SECTOR #		35 ARRESTED FOR YOUR JURISDICTION? <input type="checkbox"/> YES <input type="checkbox"/> NO																															
	E Elliot Rd / N Gilbert Rd Gilbert, Az 85234																																						
	36 CONDITION OF		37 RESIST ARREST?		38 INJURIES?		39 ARMED?		40 DESCRIPTION OF WEAPON																														
	<input type="checkbox"/> DRUNK <input type="checkbox"/> SOBER		<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> NONE <input type="checkbox"/> OFFICER		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N																																
	ARRESTEE: <input type="checkbox"/> DRINKING <input type="checkbox"/> DRUGS				ARRESTEE																																		
	41 DATE OF ARREST		42 TIME OF ARREST		43 DAY OF ARREST		44 TYPE ARREST		45 ARRESTED BEFORE?																														
	01/09/2013		23:45		S M T W T F S		ON-VIEW		<input type="checkbox"/> YES <input type="checkbox"/> NO																														
							ARREST (NO)		<input checked="" type="checkbox"/> UNKNOWN																														
	46 CHARGE-1		47 UCR CODE		50 STATE CODE/LOCAL ORD.		51 WARRANT #		52 DATE ISSUED																														
	Dui-impaired To Slightest		90D		28-1381A1																																		
48 CHARGE-2		49 UCR CODE		53 STATE CODE/LOCAL ORD.		54 WARRANT #		55 DATE ISSUED																															
Dui-bac Of .08 Or More		90D		28-1381A2																																			
56 CHARGE-3		57 UCR CODE		60 STATE CODE/LOCAL ORD.		61 WARRANT #		62 DATE ISSUED																															
Driving When License		999		28-3473A																																			
58 CHARGE-4		59 UCR CODE		63 STATE CODE/LOCAL ORD.		64 WARRANT #		65 DATE ISSUED																															
66 ARREST DISPOSITION					68 ARRESTED WITH (1) ACCOMPLICE (FULL NAME)																																		
Cite And Release					69 ARRESTED WITH (2) ACCOMPLICE (FULL NAME)																																		
VEHICLE	70 VYR	71 VMA	72 VMO	73 VST	74 VCO	TOP		75 TAG #	76 LIS	77 LIY																													
						BOTTOM																																	
	78 VIN					79 IMPOUNDED?		80 STORAGE LOCATION/IMPOUND #																															
						<input type="checkbox"/> YES <input type="checkbox"/> NO																																	
VEHICLE RELATED TO:										VEHICLE RELATION:																													
81 OTHER EVIDENCE SEIZED/PROPERTY SEIZED										<input type="checkbox"/> CONTINUED IN NARRATIVE																													
JUVENILE	82 JUVENILE					83 RELEASED TO																																	
	<input type="checkbox"/> HANDLED AND RELEASED <input type="checkbox"/> REF. TO WELFARE AGENCY <input type="checkbox"/> REF. TO ADULT COURT																																						
	DISPOSITION: <input type="checkbox"/> REF. TO JUVENILE COURT <input type="checkbox"/> REF. TO OTHER POLICE AGENCY																																						
	84 PARENT OR GUARDIAN (LAST, FIRST, MIDDLE NAME)					85 ADDRESS (STREET, CITY, STATE, ZIP)																																	
86 PHONE					87 PARENTS EMPLOYER					88 OCCUPATION																													
89 ADDRESS (STREET, CITY, STATE, ZIP)					90 PHONE																																		
RELEASE	91 DATE AND TIME OF RELEASE					92 RELEASING OFFICER NAME					93 AGENCY/DIVISION					94 ID #																							
	95 RELEASED TO					96 AGENCY/DIVISION					97 AGENCY ADDRESS																												
	98 PERSONAL PROPERTY RELEASED TO ARRESTEE					99 PROPERTY NOT RELEASED/HELD AT:					100 PROPERTY #																												
	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> PARTIAL																																						
	101 REMARKS (NOTE ANY INJURIES AT TIME OF RELEASE)																																						
102 SIGNATURE OF RECEIVING OFFICER										103 SIGNATURE OF RELEASING OFFICER										LOCAL USE																			
104 CASE #										105 SFX					106 CASE #					107 SFX					108 CASE #					109 SFX					110 ADDITIONAL CASES CLOSED NARRATIVE				
111 ARRESTING OFFICER (LAST, FIRST, M.)										112 ID #					113 ARRESTING OFFICER (LAST, FIRST, M.)					114 ID #					115 SUPERVISOR					116 WATCH CMDR.									
Robinson, Christopher										2849															Lahti					ID # 438					ID #				

ADDITIONAL ARREST NARRATIVE CONTINUED	117 DATE AND TIME OF ARREST		<input type="checkbox"/> AM	118a. CASE #	119 SFX
	01/09/2013 23:45		<input type="checkbox"/> PM	13-000000479	
			<input checked="" type="checkbox"/> MIL	118b. ARREST #	
				130000274	

120 ADDITIONAL ARREST INFORMATION

NARRATIVE

NARRATIVE

NARRATIVE



# DUI - FST Worksheet

☒ Original

☐ Supplement

Report Number:

13-000000479

Page

1

of

5

#1 HGN	#2 Walk and Turn	#3 One Leg Stan	#4 Romberg Modified	#5 Finger To Nose
<b>When I Tell You:</b> 1. Remove glasses/note contacts 2. Keep head still 3. Follow stimulus with eyes 4. Understand?	<b>When I Tell You:</b> 1. Left foot on line with right foot in front 2. Hands at sides 3. Don't move 4. Understand?	<b>When I Tell You:</b> 1. Feet together 2. Arms at sides 3. Lift leg 6 inches 4. Look at your foot 5. Count 1001, 1002, 1003 ...until told to stop 6. Understand?	<b>When I Tell You:</b> 1. Feet together 2. Arms at sides 3. Eyes closed/head back 4. Understand?	<b>When I Tell You:</b> 1. Feet together 2. Arms at sides 3. Make fist 4. Point index finger 5. Eyes closed/head back 6. Tip of finger to tip of nose and then return 7. Understand?
<b>Observations:</b> <input checked="" type="checkbox"/> Left Eye - Lack of smooth pursuit <input checked="" type="checkbox"/> Right Eye - Lack of smooth pursuit <input checked="" type="checkbox"/> Left Eye - Distinct nystagmus at maximum deviation <input checked="" type="checkbox"/> Right Eye - Distinct nystagmus at maximum deviation <input checked="" type="checkbox"/> Left Eye - Onset of nystagmus prior to 45 degrees <input checked="" type="checkbox"/> Right Eye - Onset of nystagmus prior to 45 degrees  Pupils Equal: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Equal Tracking: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Glasses/Contacts? <u>PEN</u> Stimulus: <u>PEN</u>  Vertical <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Time: <u>2340</u> Ofc: <u>ROBINSON</u>	<b>When I Tell You:</b> 1. 9 heel to toe steps 2. Count out loud 3. Look at feet 4. Keep hands at sides 5. Turn as shown 6. 9 heel to toe steps 7. Do not stop until completed 8. Understand?	<b>When I Tell You:</b> 1. 9 heel to toe steps 2. Count out loud 3. Look at feet 4. Keep hands at sides 5. Turn as shown 6. 9 heel to toe steps 7. Do not stop until completed 8. Understand?	<b>When I Tell You:</b> 1. 9 heel to toe steps 2. Count out loud 3. Look at feet 4. Keep hands at sides 5. Turn as shown 6. 9 heel to toe steps 7. Do not stop until completed 8. Understand?	<b>When I Tell You:</b> 1. 9 heel to toe steps 2. Count out loud 3. Look at feet 4. Keep hands at sides 5. Turn as shown 6. 9 heel to toe steps 7. Do not stop until completed 8. Understand?
<b>Observations:</b> <input checked="" type="checkbox"/> Cannot keep balance while listening to instructions <input type="checkbox"/> Starts before instructions are finished <input type="checkbox"/> Stops while walking <input type="checkbox"/> Does not touch heel to toe (>1/2") <input type="checkbox"/> Steps off line <input type="checkbox"/> Raises arms (>6") <input type="checkbox"/> Loses balance/improper turn <input type="checkbox"/> Incorrect number of steps	<b>Observations:</b> <input type="checkbox"/> Cannot keep balance while listening to instructions <input type="checkbox"/> Starts before instructions are finished <input type="checkbox"/> Stops while walking <input type="checkbox"/> Does not touch heel to toe (>1/2") <input type="checkbox"/> Steps off line <input type="checkbox"/> Raises arms (>6") <input type="checkbox"/> Loses balance/improper turn <input type="checkbox"/> Incorrect number of steps	<b>Observations:</b> <input type="checkbox"/> Sways while balancing <input type="checkbox"/> Uses arms for balance <input type="checkbox"/> Hopping <input type="checkbox"/> Puts foot down	<b>Observations:</b> <input type="checkbox"/> Required additional instructions during test <input type="checkbox"/> Opened eyes during test <input type="checkbox"/> Failed to keep feet together throughout test <input type="checkbox"/> Failed to keep head tilted back <input type="checkbox"/> Sways while balancing <input type="checkbox"/> Error in alphabet/count <input type="checkbox"/> Other _____	<b>Observations:</b> <input type="checkbox"/> Opened eyes during test <input type="checkbox"/> Failed to keep feet together throughout test <input type="checkbox"/> Failed to keep head tilted back <input type="checkbox"/> Used wrong finger <input type="checkbox"/> Missed nose with finger tip (Record miss location below) <input type="checkbox"/> Touched nose with pad/other part of finger <input type="checkbox"/> Swayed front to back or side to side <input type="checkbox"/> Other _____
<b>Additional Notes:</b>	<b>Additional Notes:</b>	<b>Additional Notes:</b>	<b>Additional Notes:</b>	<b>Additional Notes:</b>
<b>Shoes Removed</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<b>Shoes Removed</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<b>Shoes Removed</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<b>Shoes Removed</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<b>Shoes Removed</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<b>Line:</b> <input type="checkbox"/> Real <input type="checkbox"/> Imaginary	<b>Line:</b> <input type="checkbox"/> Real <input type="checkbox"/> Imaginary	<b>Line:</b> <input type="checkbox"/> Real <input type="checkbox"/> Imaginary	<b>Line:</b> <input type="checkbox"/> Real <input type="checkbox"/> Imaginary	<b>Line:</b> <input type="checkbox"/> Real <input type="checkbox"/> Imaginary
<b>Refused FST's</b>	<b>Refused FST's</b>	<b>Refused FST's</b>	<b>Refused FST's</b>	<b>Refused FST's</b>
<b>Test not administered for officer safety:</b> <input type="checkbox"/> #1 <input type="checkbox"/> #2 <input type="checkbox"/> #3 <input type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6	<b>Test not administered for officer safety:</b> <input type="checkbox"/> #1 <input type="checkbox"/> #2 <input type="checkbox"/> #3 <input type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6	<b>Test not administered for officer safety:</b> <input type="checkbox"/> #1 <input type="checkbox"/> #2 <input type="checkbox"/> #3 <input type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6	<b>Test not administered for officer safety:</b> <input type="checkbox"/> #1 <input type="checkbox"/> #2 <input type="checkbox"/> #3 <input type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6	<b>Test not administered for officer safety:</b> <input type="checkbox"/> #1 <input type="checkbox"/> #2 <input type="checkbox"/> #3 <input type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6
<b>Test not administered for suspect safety/injury:</b> <input type="checkbox"/> #1 <input checked="" type="checkbox"/> #2 <input checked="" type="checkbox"/> #3 <input checked="" type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6	<b>Test not administered for suspect safety/injury:</b> <input type="checkbox"/> #1 <input checked="" type="checkbox"/> #2 <input checked="" type="checkbox"/> #3 <input checked="" type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6	<b>Test not administered for suspect safety/injury:</b> <input type="checkbox"/> #1 <input checked="" type="checkbox"/> #2 <input checked="" type="checkbox"/> #3 <input checked="" type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6	<b>Test not administered for suspect safety/injury:</b> <input type="checkbox"/> #1 <input checked="" type="checkbox"/> #2 <input checked="" type="checkbox"/> #3 <input checked="" type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6	<b>Test not administered for suspect safety/injury:</b> <input type="checkbox"/> #1 <input checked="" type="checkbox"/> #2 <input checked="" type="checkbox"/> #3 <input checked="" type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6

Officer Name <b>C. ROBINSON</b>	Signature 	Ser. Number <b>2849</b>	Date <b>1/10/13</b>	Related Report Numbers
Gilbert Police Department • 75 East Civic Center Drive • Gilbert, Arizona 85296 (480) 503-6500				





# Interview - DUI

☒ Original

☐ Supplement

Report Number: 13-000000479

Page 2 of 3

Suspect STEPHANIE ANN GRISHAM

## Miranda Warnings

You have the right to remain silent. Anything you say can be used against you in a court of law. You have the right to the presence of an attorney to assist you prior to questioning and to be with you during questioning if you desire. If you cannot afford an attorney, you have the right to have an attorney appointed for you, prior to questioning. Do you understand these rights?

Es mi deber avisarle de sus derechos legales en acuerdo con la ley. Usted tiene el derecho de permanecer en silencio. Cualquier cosa que usted diga se puede usar en su contra en corte. Usted tiene el derecho de tener un abogado para asistirle antes de cualquier pregunta y que el abogado lo acompañe durante estas preguntas si usted así lo desea. Si usted no tiene el dinero para contratar un abogado, usted tiene el derecho de que se le asigne un abogado antes de le hagan preguntas.

¿Comprende usted estos derechos?

## Interview

Miranda warnings given at: 2351 Hours. By: Robinson Location: Gilbert/Elliott

Response: Yes

Implied consent law explained at: 2352 Hours. By: il Location: il

Response: Yes

Interviewing Officer (if other than arresting officer):

How long were you driving the vehicle before you were stopped/in collision?

15 MINUTES

Where were you going?

HOME

Where were you coming from?

ARIZONA MILLS MALL

Are there any mechanical defects with your vehicle? ☒ No ☐ Yes - Describe:

How would you describe your  
FINE. I DID NOT KNOW WHAT THE SPEED LIMIT WAS.

Have you been to a doctor or dentist in the past two weeks? ☐ No ☒ Yes - Why? HEADACHES.

Are you sick/ill? ☒ No ☐ Yes - What type of illness?

Are you suffering from any head injuries?

☒ No ☐ Yes - Describe:

Do you have any physical disabilities?

☒ No ☐ Yes - Describe:

Have you taken any medication or drugs in the last 24 hours?

☐ No ☒ Yes - Purpose:

XANAX - 2 HRS AGO / ZOLOFT - LAST NIGHT AT 2200 HRS.

Are you a diabetic? ☒ No ☐ Yes

Are you taking  
insulin?

☒ No ☐ Yes

When did you wake up today?

0700

How much sleep did you have in the past 24 hours?

4 HRS. MY LITTLE BOY IS SICK.

Are you tired now?

NO

When did you last eat?

THIS MORNING

What did you have to eat?

TOAST. I'M FASTING MY GYM.

Where were you drinking?

I WASN'T DRINKING TONIGHT.

With whom?

What were you drinking?

How much?

Time you started drinking?

Time you finished?

Total number of drinks you had in the last hour before you were stopped/in collision?  
ZERO

On a scale of 0 to 10, 0 feeling sober and not feeling any affects of the alcohol and 10 being completely intoxicated, how would you rate yourself right now? ZERO

At the time you were stopped?  
ZERO

Could you feel the effect of the alcohol/drugs when you were stopped/in collision?  
NO

How do you think you did on the field tests?  
N/A

Do you feel the affect of the alcohol more or less now, as compared with when you were stopped/in collision?  
I DONT FEEL ANYTHING RIGHT NOW.

Do you think the alcohol/drugs affected your driving?  
NO

Did you have anything to drink after you were stopped/in the collision?  
NO.

Would you have gone to work in the condition you were in when you were stopped?

YEP

Now?  
YEP

Any evidence of illness/injury/disability:  
NONE

Have you ever been arrested or convicted of a DUI offense?  
NEVER

If YES, what city/state/year?  
N/A

## Misc. Notes:

Officer Name

C. ROBINSON

Signature

Ser. Number

2849

Date

01/10/13

Related Report Numbers

Gilbert Police Department • 75 East Civic Center Drive • Gilbert, Arizona 85296 (480)





# DUI - Existing Conditions

☒ Original ☐ Supplement

Report Number: 13-000000479

Page 3 of 3

## CONTACT/METHOD OF

Driver Asked To Exit Vehicle: ☒ YES ☐ NO Driver Exited Vehicle On Own: ☐ YES ☒ NO  
Other: \_\_\_\_\_  
Driver Produced Driver's License: ☒ YES ☐ NO Photo: ☒ YES ☐ NO  
Driver Produced Other Identification (DESCRIBE): \_\_\_\_\_

## EXISTING CONDITIONS

Weather Conditions: ☐ Clear ☒ Cloudy ☐ Raining ☐ Windy  
☐ Other: \_\_\_\_\_  
Traffic Conditions: ☒ Light ☐ Intermittent ☐ Heavy  
☐ Other: \_\_\_\_\_

## LIGHTING CONDITIONS

Type of Surface Used for FST's:  
☒ Level ☐ Uneven ☐ Cement ☐ Asphalt ☒ Sidewalk ☐ Street ☐ Wet ☒ Dry ☐ Gravel ☐ Dirt  
☐ Other: \_\_\_\_\_  
Officer Administering The FST's (If other than investigating officer):  
NAME: \_\_\_\_\_ BADGE: \_\_\_\_\_ AGENCY: \_\_\_\_\_

## PHYSICAL CONDITIONS

Breath (Odor of intoxicating liquor): ☐ None ☐ Faint ☒ Moderate ☐ Strong  
☐ Distorted/Slurred Speech:  
Eyes: ☐ Normal ☒ Watery ☒ Bloodshot  
☐ Other: \_\_\_\_\_  
Clothing Description: ☒ Normal ☐ Torn ☐ Bloody ☐ Vomit ☐ Disarranged: \_\_\_\_\_  
☐ Other: \_\_\_\_\_  
Attitude/Behavior: ☐ Polite ☒ Cooperative ☐ Indifferent ☐ Stuporous ☐ Argumentative ☐ Antagonistic ☐ Insulting ☐ Laughing  
☐ Sleeping ☐ Crying ☐ Profanity ☐ Urinated on self ☐ Combative ☐ Hiccoughing ☐ Belching ☐ Vomiting ☐ Loud ☐ Boisterous  
☐ Other: \_\_\_\_\_

## FELONY DUI

If suspended, ask suspect, "Did you know your license was suspended/revoked?" ☐ Yes ☐ No  
If yes, subject's explanation: \_\_\_\_\_  
How did you find out your license was suspended/revoked? \_\_\_\_\_  
Cause of Suspension: ☐ Admin Per Se Suspension ☐ 2 or more prior DUI convictions within 5 years  
☐ DUI with minor in vehicle ☐ License suspended/revoked

## BREATH TESTING

Did the subject regurgitate or ingest any item during the deprivation period? ☐ No ☐ Yes  
Subject requested phone calls? ☐ No ☐ Yes - Location and time of phone calls: \_\_\_\_\_  
Advised of right to independent test? ☐ Yes ☐ No

## RIGHT TO AN INDEPENDENT TEST

You have the right to an independent test or tests by a physician or other qualified person of your own choosing to determine your alcohol concentration or drug content. An independent test is separate from the test(s) chosen by the law enforcement officer. The independent test(s) will be at your own expense.

DO YOU UNDERSTAND YOUR RIGHT TO AN INDEPENDENT TEST? **YEP**

## BLOOD DRAW

☒ CASE OFFICER IS PHLEBOTOMIST  
Blood drawn from: ☐ Left Antecubital Fossa ☒ Right Antecubital Fossa ☐ Left Wrist ☐ Right Wrist ☐ Left Hand ☐ Right Hand  
Blood Kit Expiration: 05/14 Manufacturer: TRITECH Physical Location of Blood Draw: GPD PHLEBO ROOM  
☐ OUTSIDE AGENCY - CERTIFIED PHLEBOTOMIST Agency: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
I \_\_\_\_\_ / \_\_\_\_\_ acknowledge that I have drawn blood from \_\_\_\_\_  
(print name) (signature) (print suspect's name)  
On this date of \_\_\_\_\_ at \_\_\_\_\_ hours and I am releasing the blood to Officer \_\_\_\_\_ ID# \_\_\_\_\_

## RELEASE INFORMATION

☒ Taxi ☐ Other  
Officer Name: C. ROBINSON Signature: \_\_\_\_\_ Ser. Number: 2849 Date: 1/10/13 Related Report Numbers: \_\_\_\_\_  
Gilbert Police Department • 75 East Civic Center Drive • Gilbert, Arizona 85296 (480) 503-6500





## Gilbert Police Department

Vehicle Impound/Tow ☒ Original ☐ Supplement

Report Number: 13-000000479

☐ Accident ☒ Incident

Report Title <b>DUI</b>		Location of Occurrence <b>GILBERT / ELLIOT</b>	
Date of Report <b>1-9-17</b>	Time of Report <b>2334</b>	Tow Type → <b>28-3511 - 30 day hold</b>	28-872 Tow/Impound <input type="checkbox"/> Accident <input type="checkbox"/> Abandoned <input type="checkbox"/> Traffic Hazard <input checked="" type="checkbox"/> Other: <b>DUI</b> <input type="checkbox"/> Evidence / Seizure <input type="checkbox"/> Stolen Recovery

Driver Information	
First Name <b>STEPHANIE</b>	Middle Name <b>ANN</b>
Last Name <b>GRISHAM</b>	Suffix
Home Address	DL Number
City	DL ST
State	Home Phone
Zip Code	

Vehicle Information							
Year <b>04</b>	Color <b>BLK</b>	Make <b>MIAT</b>	Model <b>ENDEAVOR</b>	Style <b>SUV</b>	License Plate # <b>AFIL800H</b>	State <b>AZ</b>	VIN
Registered Owner		28-3511 Hold Notification: Date <b>1-9-17</b>		Time <b>2334</b>		Method: <input type="checkbox"/> MAILED <input checked="" type="checkbox"/> IN - PERSON	

Registered Owner Same as Driver	
First Name	Middle Name
Last Name	Suffix
Home Address	Home Phone
City	State
Zip Code	Cell Phone

Registered Owner		28-3511 Hold Notification: Date		Time		Method: <input type="checkbox"/> MAILED <input type="checkbox"/> IN - PERSON	
First Name	Middle Name	Last Name		Suffix		Home Phone	
Home Address	City		State		Zip Code		Cell Phone

Lien Holder		28-3511 Hold Notification: Date		Time		Method: <input type="checkbox"/> MAILED <input type="checkbox"/> IN - PERSON	
Business Name		Phone		Mailing Address		Fax	
City		State		Zip Code			

Tow Company: <b>ACE TOWING</b>	Address <b>458 S. LEBARON</b>	City <b>MESA</b>	State <b>AZ</b>	Phone Number <b>602-276-1675</b>
Tow Company Storage Yard Address		Tow Truck Driver Name (Print) <b>LINFORM</b>		Tow Authorized By <b>OFFICER</b>

CAUSE FOR 28-3511 - 30 DAY HOLD/IMPOUNDMENT (CHECK ALL THAT APPLY):	
<input type="checkbox"/> The driver has never been issued a driver's license or permit or does not produce evidence of a driver's license from another jurisdiction <input checked="" type="checkbox"/> The driver's driving privilege is suspended or revoked. <input type="checkbox"/> Ignition interlock required and not functioning. <input type="checkbox"/> The driver is being arrested for either extreme DUI or Aggravated DUI and currently licensed spouse is not present. (Vehicle must be registered and insured to be eligible to be release to spouse) <input type="checkbox"/> The driver was arrested for under 21 operating vehicle with alcohol in body. <input type="checkbox"/> The person is involved in an accident (all 3 required):: 1. That results in property damage or injury to or death of another person <u>And</u> 2. Person's driving privilege is canceled, suspended, or revoked or has never been issued a license or permit <u>And</u> 3. The person does not have insurance.	

Vehicle Inventory	
Inventory Completed By:	
Personal Property <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Keys in Vehicle <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Driveable <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Radio/Stereo <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Apparent Damage <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Camper <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Tires/Wheels <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Collision Involved <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
List Personal Property:	PAPERWORK, WIFE OPERER, DOG LEASH, COIL, SLEEPING BAG, CAR SEAT, SIREN RADIO,

Remarks: 123393 mi.w/

28-872 Tow - Owner Notification: Date: _____ Time: _____ Method: <input type="checkbox"/> Phone <input type="checkbox"/> In-Person		Entered ACIC as STORED	
Case Officer Name <b>ROBINSON</b>	Signature <b>OR FILE</b>	Ser. Number <b>2849</b>	
Tow Sheet Completed By <b>OYAI</b>	Signature <b>[Signature]</b>	Ser. Number <b>3666</b>	

Gilbert Police Department • 75 East Civic Center Drive • Gilbert, Arizona 85296 (480) 503-6500

 28-872/28-3511 Tow: White (Original) - Report Blue (Copy) - Mailing Pink (Copy) - Driver/Owner of Vehicle Yellow (Copy) - Tow Driver Receipt  
 Evidence Impound: White (Original) - Property Custodian Blue (Copy) - Agency Use Pink (Copy) - Report Yellow (Copy) - Tow Driver Receipt

[illegible]

First Name	Middle Name	Last Name	Suffix	DL Number	DL ST
Home Address		City	State	Zip Code	Home Phone
Tow Company:	Address	City	State	Phone Number	
Tow Company Storage Yard Address		Tow Truck Driver Name (Print)			Tow Authorized By

[illegible]





GILBERT POLICE DEPARTMENT  
VEHICLE IMPOUND/AUTHORIZATION FOR RELEASE

VEHICLE/INCIDENT	CONTROL NO. 2013000123	CASE 13-000000479	AGENCY GPD	NCIC	STATE #	DATE/TIME PRINTED 01/14/2013 11:15:44
	YEAR 2004	MAKE MITSUBISHI	MODEL ENDEAVOR	STYLE STATION WAGON/SUV	COLORS BLACK	
	TAG (YEAR/STATE/LICENSE) 2013/AZ/AFR8064		VIN [REDACTED]	ODOMETER 123393		
	OWNER GRISHAM, STEPHANIE ANN		ADDRESS [REDACTED]		PHONE [REDACTED]	
LEIN HOLDER ADDRESS PHONE						
TOW/IMPOUND	NAME PERSON ARRESTED GRISHAM, STEPHANIE ANN		CHARGES DUI-IMPAIRED TO SLIGHTEST DEGREE			
	STATUS TOWED	DATE/TIME 01/10/2013 00:49	REASON 3511	OFFICER ROBINSON, CHRISTOPHER	FROM GILBERT/ELLIOT	CITY GILBERT
	COMPANY ACE TOWING	(602)276-1675		DRIVER LINFORD	TO 512 S LEBARON DR MESA, AZ	PRIVATE TOW <input type="checkbox"/>
	HOLD <input type="checkbox"/>	HOLD AUTHORIZED BY ROBINSON, CHRISTOPHER	DATE/TIME 01/10/2013 00:50:22	REASON SUSPENDED LICENSE	HOLD REMOVED BY HUDSON, KHALEEYAH Y	DATE/TIME 01/14/2013 11:15:05
CONDITION	<b>Vehicle</b>  1 = SLIGHT; 2 = MODERATE; 3 = EXTREME			<b>Trailer</b>  1 = SLIGHT; 2 = MODERATE; 3 = EXTREME		
	INVENTORIED BY ROBINSON, CHRISTOPHER  DATE/TIME 01/10/2013 00:50:05  WITNESS					
RELEASE	<b>THE FOLLOWING CHECKED PROVISIONS APPLY TO THE VEHICLE RELEASE:</b>					
	<input checked="" type="checkbox"/> Vehicle to be released to AUTHORIZED PARTY upon payment of towing and storage charges.					
	<input type="checkbox"/> Vehicle determined to be stolen. Towing and storage charges are waived and are owed by the driver at the time the vehicle was impounded and the vehicle is to be released to an AUTHORIZED PARTY.					
	<input type="checkbox"/> Vehicle improperly impounded. The AUTHORIZED PARTY is not responsible for payment and the vehicle is to be released to an AUTHORIZED PARTY.					
<b>An AUTHORIZED PARTY must have a valid registration for the vehicle and present a valid driver's license AND must meet ONE of the following criteria:</b>						
The registered owner, OR; The spouse of the registred owner, OR; An agent of the registered owner, OR; A party having an interest in the vehicle as noted on the vehicle's title, OR; A person possessing a notarized statement of power of attorney from a registered owner stating they have permission to have the vehicle released to them.						
RELEASE	RELEASED BY HUDSON, KHALEEYAH Y		[REDACTED]		DATE/TIME 01/14/2013 11:15:17	
	RELEASED TO GRISHAM, STEPHANIE ANN		ADDRESS [REDACTED]		PHONE [REDACTED]	
	NOTES ON 01-14-2013, AT 1113 HOURS, I ADMINISTERED A 3511 EARLY RELEASE HEARING REFERENCE THIS CASE. STEPHANIE ANN GRISHAM, THE OWNER OF THE VEHICLE THAT WAS TOWED, PRESENTED A VALID ARIZONA DRIVERS LICENSE, VALID REGISTRATION FOR THE VEHICLE, VALID INSURANCE FOR THE VEHICLE, AND PRESENTED PROOF OF OWNERSHIP FOR THE VEHICLE VIA THE TITLE. STEPHANIE'S LICENSE IS NO LONGER SUSPENDED. I RELEASED THE					

More...

**GILBERT POLICE DEPARTMENT  
TOW/IMPOUND SUPPLEMENTS**

CONTROL NO.  
2013000123

DATE/TIME PRINTED  
01/14/2013 11:15:44

Release Notes Continued -

VEHICLE AS PER ARS 28-3511. I COLLECTED THE \$100.00 HEARING FEE AND THE RELEASE PAPERWORK IS ATTACHED TO THIS SUPPLEMENT.



# MESA POLICE DEPARTMENT FORENSIC SERVICES

## TOXICOLOGY SCIENTIFIC EXAMINATION REPORT

GILBERT POLICE DEPARTMENT



CASE NUMBER: 13000000479

OFFICER: Robinson 2849

NAME(S): STEPHANIE ANN GRISHAM

### ITEMS:

G346057 (001): One blood collection kit

G346057-AA (001-AA): Blood specimen

G346057-AB (001-AB): Blood specimen

### RESULTS:

(001-AA): Analysis of the Blood specimen showed it to contain 0.105 gram of ethyl alcohol per 100 milliliters of blood.

This analysis was conducted by gas chromatography in accordance with Arizona Department of Public Safety Regulation R13 - 10, Article 1, which includes a Quality Assurance Program to ensure the validity of the test results.

I am a licensed Blood Alcohol Analyst for the analysis of blood/bodily fluid specimens for alcohol content. My Arizona permit is #335.

*Stacy L. Schlichting*

Stacy Lynn Schlichting, Forensic Scientist I, 18150

1/25/2013

Date

Administrative Review:

02/07/2013

*TH* 11775





# CHAIN OF CUSTODY REPORT

LAB CASE NUMBER: FSS011113-0036

CASE NUMBER: 13000000479

<u>PIN From</u>	<u>PIN To</u>	<u>Date/Time</u>
<b>Subm #:</b> 001	<b>Prop ID #:</b> G346057	One blood collection kit
<input type="checkbox"/> Pacini, John	<input checked="" type="checkbox"/> Thomas, Natalie	01/16/2013 10:09:37
<input checked="" type="checkbox"/> Thomas, Natalie	<input type="checkbox"/> Tox Walk-In	01/16/2013 14:16:15
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/17/2013 08:15:30
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/17/2013 09:51:26
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/18/2013 08:17:07
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/18/2013 13:14:48
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/22/2013 08:55:39
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/22/2013 13:28:33
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/25/2013 12:39:23
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/25/2013 14:54:35
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Thomas, Natalie	01/30/2013 09:17:31
<input checked="" type="checkbox"/> Thomas, Natalie	<input type="checkbox"/> Pacini, John	01/30/2013 09:31:18
<b>Subm #:</b> 001-AA	<b>Prop ID #:</b> G346057-AA	Blood specimen
<input type="checkbox"/> Pacini, John	<input checked="" type="checkbox"/> Thomas, Natalie	01/16/2013 10:09:37
<input checked="" type="checkbox"/> Thomas, Natalie	<input type="checkbox"/> Tox Walk-In	01/16/2013 14:16:15
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/17/2013 08:15:30
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/17/2013 09:51:26
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/18/2013 08:17:07
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/18/2013 13:14:48
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/22/2013 08:55:39
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/22/2013 13:28:33
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/25/2013 12:39:23
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/25/2013 14:54:35
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Thomas, Natalie	01/30/2013 09:17:31
<input checked="" type="checkbox"/> Thomas, Natalie	<input type="checkbox"/> Pacini, John	01/30/2013 09:31:18
<b>Subm #:</b> 001-AB	<b>Prop ID #:</b> G346057-AB	Blood specimen
<input type="checkbox"/> Pacini, John	<input checked="" type="checkbox"/> Thomas, Natalie	01/16/2013 10:09:37
<input checked="" type="checkbox"/> Thomas, Natalie	<input type="checkbox"/> Tox Walk-In	01/16/2013 14:16:15
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/17/2013 08:15:30
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/17/2013 09:51:26
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/18/2013 08:17:07
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/18/2013 13:14:48
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/22/2013 08:55:39
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/22/2013 13:28:33
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	01/25/2013 12:39:23
<input checked="" type="checkbox"/> Schlichting, Stacy Lynn	<input type="checkbox"/> Tox Walk-In	01/25/2013 14:54:35

## CHAIN OF CUSTODY REPORT

CONTINUED

CASE NUMBER: 13000000479

<u>PIN</u> <u>From</u>	<u>PIN</u> <u>To</u>	<u>Date/Time</u>
<input type="checkbox"/> Tox Walk-In	<input checked="" type="checkbox"/> Thomas, Natalie	01/30/2013 09:17:31
<input checked="" type="checkbox"/> Thomas, Natalie	<input type="checkbox"/> Pacini, John	01/30/2013 09:31:18

**Blood Alcohol Worksheet**

Mesa Forensic Services

LAB CASE NUMBER: FSS011113-0036

CASE NUMBER: 13000000479

**Laboratory Notes**

Requesting Officer: Robinson

Gilbert Police Department

75 East Civic Center Drive

Gilbert, AZ 85296

Subjects:

Suspect: GRISHAM, STEPHANIE

ANN

**Blood Alcohol Notes****Evidence Notes**

---

**Subm #:** 001      **Desc:** One blood collection kit      **Property ID:** G346057**Accession Date:** 1/17/2013 09:22:39**Mesa Kit**  
[ ]**Cardboard Box**  
Sealed [X]**Plastic Box**  
Sealed [X]**"Betadine" Swab**  
[ ]**Notes:****Number of Tubes:** 2**Other Package****Other Swab** BZK

---

**Subm #:** 001-AA      **Desc:** Blood specimen      **Property ID:** G346057-AA**Approx.**  
**mL of Blood**  
9**Sealed**  
[X]**Tube Type:**  
NaF & Oxalate**DR# on Tube****Name on Tube**  
STEPHANIE GRISHAM**Print**  
**Label**  
[ ]**Notes:** NO DR ON TUBE.

---

**Subm #:** 001-AB      **Desc:** Blood specimen      **Property ID:** G346057-AB**Approx.**  
**mL of Blood**  
9**Sealed**  
[X]**Tube Type:**  
NaF & Oxalate**DR# on Tube****Name on Tube**  
SAME**Print**  
**Label**  
[ ]**Notes:** SAME

# BLOOD ALCOHOL WORKSHEET

Mesa Forensic Services

LAB CASE NUMBER: FSS011113-0036

CASE NUMBER: 13000000479

## Laboratory Notes Continued

---

### Result Notes

Subm #: 001-AA

	<u>Result</u>	<u>Analyst</u>	<u>Batch Number</u>	<u>Analysis Date</u>
Result 1:	0.1062	Stacy Schlichting	012213BACa	01/22/2013
Result 2:	0.1055	Stacy Schlichting	012213BACa	

Reported Result: 0.105g/100 mL

Notes:

### Lab Notes

Batch 012213BAC was reprocessed as batch 012213BACa due to a file path error.

Batch 011813BAC was reanalyzed as batch 012213BAC.

The data from batch 011813BAC was not used because the calibration line did not meet QC criteria.

SS18150 01/25/2013





# Motor Vehicle Division

Mail Drop 533M  
Motor Vehicle Division  
PO Box 2100  
Phoenix AZ 85001-2100

## ADMIN PER SE/IMPLIED CONSENT AFFIDAVIT

LE or DR Case Number 13-479

Complaint Numbers Issued \_\_\_\_\_

40-5807 R10/11 www.azdot.gov

Charges: ☒ ARS 28-1381 ☐ 28-1382 ☐ 28-1383 ☐ 4-244.34 ☐ 13-1201  
☐ 13-1204 ☐ Other Title 13, Chapter 11 charge: \_\_\_\_\_

☐ Yes ☒ No While transporting hazardous material? (ARS 28-101)  
☐ Yes ☒ No While operating a commercial motor vehicle?

Driver Name (first, middle, last, suffix) <u>Stephanie Ann Grisham</u>	Date of Birth [REDACTED]	Driver License Number [REDACTED]	Class [REDACTED]	State [REDACTED]
Address [REDACTED]	City <u>Gilbert</u>	State <u>AZ</u>	Zip <u>85296</u>	

On (date) 1/9/13 at (time) 2334 at (location) Gilbert / H Elliot

- ☐ I had probable cause to believe that the person named caused or was cited for an accident resulting in death or serious physical injury while driving a motor vehicle. (State the probable cause on the lines below.)
- ☒ I had reasonable grounds to believe the person named was driving or in actual physical control of a motor vehicle while under the influence of intoxicating liquor and/or drugs, and I placed the named person under arrest therefor.

Among the facts leading to that belief were: speeding, bloodshot/watery eyes, odor, HGN-1, PBT 0.099

- ☒ The admonitions on the back of the original copy were read to the person. Officer Initials: UR
- ☐ The admonitions were not read because the person was either unconscious or incapable of refusal.
- ☒ The person submitted to ☐ breath ☒ blood tests
- Test results: ☒ Indicated alcohol concentration of: 0.105 ☐ Indicated positive for \_\_\_\_\_ (drug) ☐ Results not available
- ☐ The person refused to take or did not complete the tests in the following manner: \_\_\_\_\_

☐ Yes ☒ No Did the person cause serious physical injury or death as defined in ARS 13-105 during this incident?

**OFFICER CERTIFICATION** I certify that the above is true and correct. I request that any hearing be held in MARIUPOA-WILSON County.

Law Enforcement Officer Name <u>C. Robinson</u>	Badge Number <u>2819</u>	Law Enforcement Officer Signature <u>[Signature]</u>
Law Enforcement Officer Agency <u>Gilbert</u>	ORI Number <u>A20071100</u>	Law Enforcement Officer Station <u>Sartan</u>
Agency Address <u>75 E Civic Center Dr</u>	City <u>Gilbert</u>	State <u>AZ</u> Zip <u>85296</u>
Test Operator Name [REDACTED]	Badge Number [REDACTED]	Test Operator Signature [REDACTED]

### SURRENDER OF ARIZONA DRIVER LICENSE

Pursuant to ARS 28-1321 and 28-1385, the law enforcement officer must require the surrender of all Arizona driver licenses or permits in the person's possession. If no license or permit is attached, state reason: ☐ Lost ☐ Destroyed ☐ Nonresident ☐ Other: \_\_\_\_\_

### ORDER OF SUSPENSION

One box must be checked.

Date Served

Time Served

Please see reverse side to request a Summary Review or Hearing.

- ☐ Pursuant to ARS 28-1321, your Arizona driving privilege is suspended effective 15 days from Date Served. The suspension is for 12 months, or 2 years if there is a prior implied consent refusal, within the last 84 months, on your record. This order is final unless a hearing is requested online or in writing and received within 15 days from Date Served. This action is a result of your failure to successfully complete or refusal to submit to tests to determine alcohol concentration or drug content. This suspension will not end until all reinstatement requirements are met including completion of alcohol or drug screening.
- ☐ Pursuant to ARS 28-1385, your Arizona driving privilege is suspended for not less than 90 consecutive days effective 15 days from Date Served. If a review of your driver record indicates that you have completed alcohol or drug screening and are eligible for a 60-day restricted driving permit, one will automatically be mailed to your address of record within 45 days from Date Served. This order is final unless a summary review or hearing is requested online or in writing and received within 15 days from Date Served. This suspension is a result of tests to which you submitted. This suspension will not end until all reinstatement requirements are met including completion of alcohol or drug screening.

**TEMPORARY DRIVER PERMIT** — This entire form will serve as a temporary driver permit that will expire 15 days from the Date Served. However, if you request a summary review or hearing, then this permit will remain valid until the summary review or hearing decision has been made. If your Arizona driver license/permit is currently suspended or revoked, this permit does not authorize you to operate a motor vehicle.

Sex	Weight	Height	Eyes	Hair	Class	Restrictions
Permit Not Issued Because					Licensee Signature	